

Consortium Mtg Closed Issues/Action Items Report

Transaction: 820

HIPAA Consortium Meeting

State: AZ

Issue/Action #	A-820-00133	Finance	2-High	Mary Kay McDaniel	Closed
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Action Item	CRS/ BHS we have additional work to do, 820 document will be presented	Responsible Person:	Date Opened:	Date Due:	Date Completed:
	Description: CRS/ BHS we have additional work to do, 820 document will be presented separately to them.	Tom Walsh	4/9/2003		6/25/2003
	Resolution: Completed				

Issue/Action #	A-820-00271	Finance	2-High	Lori Petre	Closed
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Action Item	There was also a mistake in the Companion Guide in regards to those;	Responsible Person:	Date Opened:	Date Due:	Date Completed:
	Description: 820 implementation status - there was an issue with the prior plan letter and the transitional listing were not going out and now have been retrospectively posted. Action Item: There was also a mistake in the Companion Guide in regards to those; the correction will be in the next publication.	Lori Petre	10/8/2003		10/24/2003
	Resolution: The correction to the 834/820 Companion Document has been completed accordingly effective 10/24/03.				

Issue/Action #	A-820-00267	Finance	2-High	Nancy Mischung	Closed
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Action Item	We will review the 820-service level. The 820's take longer to run normally and we	Responsible Person:	Date Opened:	Date Due:	Date Completed:
	Description: We will review the 820-service level. The 820's take longer to run normally and we can see what service level we can meet and communicate this time to you.	Nancy Mischung	10/8/2003		10/29/2003

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Transaction: 820

HIPAA Consortium Meeting

Resolution:

Responded to in 10/29/03 meeting.

Issue/Action #	A-820-00253	Finance	2-High	Consortium Membe	Closed
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Action Item

follow up on the 820 for BHS

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Lori Petre

8/27/2003

9/12/2003

Description:

Q: BHS will like a whole file?

A: Action Item: Lori will follow up on the 820 for BHS.

Resolution:

Sent 09/12.

Issue/Action #	A-820-00250	Finance	2-High	Consortium Membe	Closed
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Action Item

Lori will follow up on the 820 for BHS.

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Lori Petre

8/27/2003

9/12/2003

Description:

Lori will follow up on the 820 for BHS.

Resolution:

Sent 09/12

Issue/Action #	A-820-00245	Finance	2-High	Consortium membe	Closed
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Consortium Mtg Closed Issues/Action Items Report

Transaction: 820

HIPAA Consortium Meeting

Action Item	The first 820-capitation remittance should be available 10/02 or 10/09.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	8/13/2003		9/4/2003
	Description:				
	The first 820-capitation remittance should be available 10/02 or 10/09. Action Item: We will clarify the capitation payment date as soon as we get direction from Finance.				
	Resolution:				
	10/08 has been established as the run date for the first 820.				

Issue/Action #	A-820-00242	Finance	2-High	Consortium membe	Closed
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Action Item	When we run the 820 it will run for the Wednesday for the week prior.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	8/13/2003		8/27/2003
	Description:				
	Q: Which enrollment period will the 820 be for? A: Finance pays in advance when we run the payment cycle. When we run the 820 it will run for the Wednesday for the week prior. For example: Capitation payments week of the 24th through the 30th will be paid October 2nd. Action: Frank will document this process, and it will be sent out with minutes or distributed in our next meeting.				
	Resolution:				
	Completed. Memo distributed 08/27/03 at the Consortium meeting.				

Issue/Action #	A-820-00235	Other - see notes below	2-High	Consortium membe	Closed
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Action Item	Q: Hospital kicks? NPR files after September 27?	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	8/13/2003		8/25/2003
	Description:				
	Q: Hospital kicks? NPR files after September 27? Action: Jim will look into this and send response.				
	Resolution:				

Consortium Mtg Closed Issues/Action Items Report

Transaction: 820

HIPAA Consortium Meeting

The Manual Payment Roster, which is made available to the MCOs as an electronic file, will no longer be produced for MCOs receiving the 820 file. Information on the Kick payment, including rate code and applicable payment dates, will be included in the 820 file.

Issue/Action #	A-820-00154		2-High	Lori Petre	Closed
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Action Item	What will the response turnaround for a transaction be?	Responsible Person:	Date Opened:	Date Due:	Date Completed:
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Description:

What will the response turnaround for a transaction be? The task has been assigned to research the process between project managers.

Resolution:

Closed. Same as A-997-00155

Issue/Action #	A-820-00234	Other - see notes below	2-High	Consortium membe	Closed
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Action Item	clarify the capitation payment date.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
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Description:

The last daily in September and first monthly in October will be in the 834 format.

Recently we have clarified that the last daily of September has to be an 834.

September 26th is the last old format daily roster.

Then we will begin with critical path and promotes for HIPAA.

This will run through September 28th, the last daily will be dated September 27th, and available on September 28th.

September 28th will run the monthly roster for October and should be completed September 30th. Available for pickup September 30th.

We will get into the first daily for October, including 9/28, 9/29, 9/30 and dated 10/01.

Then a normal cycle processes.

Action: Clarification will be added to the document. Will be distributed with the minutes.

The first 820-capitation remittance should be available 10/02 or 10/09.

Action Item: We will clarify the capitation payment date.

Q: Which enrollment period is that?

Consortium Mtg Closed Issues/Action Items Report

Transaction: 820

HIPAA Consortium Meeting

A: Finance pays in advance when we run the payment cycle. When we run the 820 it will run for the Wednesday for the week prior.

Capitation payments week of the 24th through the 30th will be paid October 2nd.

Action: Frank will write this down and it will be sent out with minutes.

Resolution:

No. Memo dated 08/26/03 distributed to Consortium members 8/27/03.

Consortium Mtg Closed Issues/Action Items Report

Transaction: 834

HIPAA Consortium Meeting

State: AZ

Issue/Action #	A-834-00145	Finance	2-High	MaryKay McDaniel	Closed
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Action Item

If we need and we can all agree the Voucher number could be placed at the

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Description:

3/12/2003

3/22/2003

If we need and we can all agree the Voucher number could be placed at the Supplementary ID in the 2000 Member detail level.

Resolution:

The voucher number has been added to the 834 transaction.

Issue/Action #	A-834-00276		2-High	MaryKay McDaniel	Closed
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Action Item

ction type for FYI or TPL changes, currently they are falling into a 33.

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Description:

Lori Petre

10/8/2003

11/4/2003

The other thing on the action codes that is not there, if an action type for FYI or TPL changes, currently they are falling into a 33.
This will also be reviewed.
Q: Why can't we have a change of location 43 for county out?
Action Item: We will make a note of this and address it.

Resolution:

This change is being promoted with the actionreasoncd table changes next Wednesday.

Issue/Action #	A-834-00275	Recipient	2-High	Consortium Membe	Closed
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Consortium Mtg Closed Issues/Action Items Report

Transaction: 834

HIPAA Consortium Meeting

Action Item	The county move out code is still an issue. It was removed, as it was no	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	10/8/2003		10/21/2003
Description:					
The county move out code is still an issue. It was removed, as it was no longer needed per the workgroup. Q: Why is it not mapped to Termination of Benefits instead of leaving it blank? Action Item: Tom is reviewing.					
Resolution:					
This has been promoted to test. Per TF email 10/21/03 The AZACTIONREASONCD table which has the action code mapping for HIPAA compliant codes has been promoted to test. This will stay in test until the Health Plans have finished testing this. It is to be promoted to production after that.					

Issue/Action #	A-834-00244	Recipient	2-High	Consortium membe	Closed
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Action Item	HIPAA Monthly/Daily files, Clarification will be added to the document.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	8/13/2003		9/12/2003
Description:					
834/820 HIPAA Monthly/Daily files: The last daily in September and first monthly in October will be in the 834 format. Recently we have clarified that the last daily of September has to be an 834. September 26th is the last old format daily roster. Then we will begin with critical path and promotes for HIPAA. This will run through September 28th, the last daily will be dated September 27th, and available on September 28th. September 28th will run the monthly roster for October and should be completed September 30th. Available for pickup September 30th. We will get into the first daily for October, including 9/28, 9/29, 9/30 and dated 10/01. Then a normal cycle processes. Action Item: Clarification will be added to the document. Will be distributed with the minutes, and discussed again at the next meeting.					
Resolution:					
Addressed w/each health plan 09/12/03					

Issue/Action #	A-834-00226	Recipient	2-High	Lori Petre	Closed
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Consortium Mtg Closed Issues/Action Items Report

Transaction: 834

HIPAA Consortium Meeting

Action Item	Will initiate a problem report to make option #2.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	7/16/2003		8/11/2003
	Description: Will initiate a problem report to make this change. Take everything down to the 2300 level and make it health coverage. Add is a 021, insurance one code would be an AG. AG is Preventative care wellness. Plan coverage description of PG and effective date as the date the file was processed.				
	Resolution: Initiated problem ticket.834217				

Issue/Action #	A-834-00148	Recipient	2-High	MaryKay McDaniel	Closed
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Action Item	We will need to look at how to differentiate from CRS, TSC or HMO in	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			3/12/2003		3/22/2003
	Description: We will need to look at how to differentiate from CRS, TSC or HMO in the PRA client. When we send the minutes this information will be sent as well.				
	Resolution: Done. See the updated companion guides and the examples which will be on the web site next week.				

Issue/Action #	A-834-00126	Testing	2-High	Lori Petre	Closed
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Action Item	Those who have volunteered for pilot testing we will be contacting by later next	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			3/12/2003		4/9/2003
	Description: Those who have volunteered for pilot testing we will be contacting by later next week.				
	Resolution: Addressed.				

Consortium Mtg Closed Issues/Action Items Report

Transaction: 834

HIPAA Consortium Meeting

Issue/Action #	I-834-00176	Recipient	4-Future Enhanc	MaryKay McDaniel	Closed
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Issue	Custodial parent information is available at DES, their processes have to change,	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		MaryKay McDaniel	3/25/2003		6/4/2003
	Description:				
	Custodial parent information is available at DES, their processes have to change, our processes have to change, new action codes need to be developed.				
	Resolution:				
	Research completed. There is no entity that can provide the appropriate information.				

Issue/Action #	A-834-00150	Other - see notes below	2-High	Lori Petre	Closed
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Action Item	Put the STFE file increment in the project plan for post implementation, and	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			3/12/2003		3/22/2003
	Description:				
	Put the STFE file increment in the project plan for post implementation, and look at it on an incremental basis, to see if the 1,000 number should increase				
	Resolution:				
	Done. The initial 834 transactions will be set at increments of 1000. The issue to review post-implementation has been included in the implementation document.				

Consortium Mtg Closed Issues/Action Items Report

Transaction: 835 Claims

HIPAA Consortium Meeting

State: AZ

Issue/Action #	A-835-00158	HIPAA Enhancements	2-High	Consortium Membe	Closed
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Action Item	Contingency plan	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			5/14/2003		6/11/2003
	Description: The 835 and 837 contingencies will be available by the end of the month, or no later than 06/04/03...				
	Resolution: Emailed.				

Consortium Mtg Closed Issues/Action Items Report

Transaction: 837 Claims (all)

HIPAA Consortium Meeting

State: AZ

Issue/Action #	A-837-00239	Claims	2-High	Mary Kay McDaniel	Closed
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Action Item

Segment summary sheets will be sent out with minutes.

Responsible Person:

Date Opened:

Date Due:

Date Completed:

MaryKay McDaniels

8/13/2003

8/21/2003

Description:

Action: Segment summary sheets will be sent out with minutes.

Resolution:

Health plans have the information in the Implementation Guides, not necessary to send out, but need to have at next Consortium meeting for discussions.

Issue/Action #	A-837-00241	Claims	2-High	Lori Petre	Closed
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Action Item

CMS testing status – email sent requesting status and another will be

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Lori Petre

8/13/2003

8/28/2003

Description:

CMS testing status – email sent requesting status and another will be sent to those who have not replied.

Resolution:

Completed

Issue/Action #	A-837-00238	Claims	2-High	Consortium membe	Closed
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Action Item

Follow-up of provider number at line levels

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Lori Petre

8/13/2003

8/21/2003

Description:

Q: How many health plans will allow in system line level providers different from the header level provider #? Can you adjudicate that claim?

A: From an encounter perspective then we will not look at getting different providers at that line. That is five additional id numbers that may need to be carried at the line level.

Consortium Mtg Closed Issues/Action Items Report

Transaction: 837 Claims (all)

HIPAA Consortium Meeting

AHCCCS can capture this information but not adjudicate it.

Action: Follow-up of provider number at line levels. Mary Kay or Lori?

Resolution:

Completed. Took out of the maps.

Issue/Action #	A-837-00256	Claims	2-High	Consortium Membe	Closed
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Action Item

Q: For late charges, how are we going to refer the old claim?

Responsible Person:

Date Opened:

Date Due:

Date Completed:

MaryKay McDaniels

9/17/2003

10/22/2003

Description:

Q: For late charges, how are we going to refer the old claim?

Action Item: This is one that we are working on to layout along with the denial codes.

Resolution:

102203 email MK: Per Brent, Late charges are not allowed. Should not be an issue.

Issue/Action #	A-837-00266	Claims	2-High	Consortium Membe	Closed
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Action Item

We will share with you which providers are certified via Web.

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Lori Petre

10/8/2003

10/23/2003

Description:

We will share with you which providers are certified via Web.

Resolution:

Completed.

Consortium Mtg Closed Issues/Action Items Report

Transaction: 837 Inst. Claims

HIPAA Consortium Meeting

State: AZ

Issue/Action #	A-837-00138	Claims	2-High	Lori Petre	Closed
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Action Item	A draft Companion document version will be put out on the Claims 837 next	Responsible Person:	Date Opened:	Date Due:	Date Completed:
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Description:		4/9/2003		4/16/2003
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A draft Companion document version will be put out on the Claims 837 next week.

Resolution:

The document has been placed on the Web site as of 04/16/03.

Issue/Action #	A-837-00159	HIPAA Enhancements	2-High	Consortium Membe	Closed
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Action Item	Contingency plan 837	Responsible Person:	Date Opened:	Date Due:	Date Completed:
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Description:		5/14/2003	6/4/2003	6/11/2003
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The 835 and 837 contingencies will be available by the end of the month, or no later than 06/04/03..

Resolution:

Emailed

Consortium Mtg Closed Issues/Action Items Report

Transaction: 837 Inst. Enc.

HIPAA Consortium Meeting

State: AZ

Issue/Action #	A-837-00236	Other - see notes below	2-High	Consortium membe	Closed
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Action Item	adjustment reason codes meaning what you paid and why you paid	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	8/13/2003		10/22/2003
Description:					
For us to figure out the Health plan payment we identify who the Health Plan was and get the actual payment amounts, everything else is considered as Other payer payment amounts.					
Even if health plan pays 0, two loops are expected.					
The hp paid amounts are a required field.					
Action: We will need to put adjustment reason codes meaning what you paid and why you paid.					
Resolution:					
Email MK 102203: The Health plan must send in the CAS segments with what and how the claim/line was paid.					

Issue/Action #	A-837-00203		1-Critical	Lori Petre	Closed
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Action Item	Consideration of a delayed implementation of 837 Encounters	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	6/4/2003		6/30/2003
Description:					
Consideration of a delayed implementation of 837 Encounters.					
Once we have heard from everyone, we will work on our decision regarding encounters and notify you by the middle of next week. We would like to get this out as soon as possible, so you can start thinking about further implications.					
Resolution:					
A final decision was made to delay the HIPAA Encounter Implementation date to 01/16/2004. This decision impacts the 834 I/P/D, NCPDP and U277 transactions.					

Issue/Action #	A-837-00202		1-Critical	Lori Petre	Closed
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Consortium Mtg Closed Issues/Action Items Report

Transaction: 837 Inst. Enc.

HIPAA Consortium Meeting

Action Item		Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	6/4/2003		6/23/2003
	Description:				
	Resolution:				
	no info in record				

Issue/Action #	A-837-00274		2-High	Consortium Membe	Closed
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Action Item	Q: When was it effective that the outpatient could not reflect ICD9s?	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	10/8/2003		10/10/2003
	Description:				
	Q: When was it effective that the outpatient could not reflect ICD9s? Action Item: This is a HIPAA rule, we will check if this is reflected in the UB manual.				
	Resolution:				
	As follow-up to the discussions on ICD9 that occurred in Wednesday Consortium meeting please see the following information. Excerpt #1: Lori, this is probably the best outline/detail regarding the ICD9CM procedure code.... The health plans may find it helpful. MK -----Original Message----- From: Walter Suarez [mailto:walter.suarez@sga.us.com] Sent: Thursday, October 09, 2003 9:42 PM To: WEDI Codesets Subworkgroup List Subject: RE: ICD-9-CM for UB92 issue - not allowed for hospitals outpatient claims [My apologies for the lengthy response] Thuky, This is one of those 'sleeper' issues that just got 'unearthed' and is causing major headaches among providers and private payers.				

Tuesday, November 18, 2003

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Transaction: 837 Inst. Enc.

HIPAA Consortium Meeting

During the most recent CMS conference calls, CMS officials clarified that the regulations (and not the Implementation Guides) are the ones establishing the requirement to use ICD-9 Vol 3 for inpatient procedures and CPT/HCPCS for outpatient hospital procedures. Below is the specific citations from the final HIPAA regs that specify these selective coding use requirements.

They all seemed a bit surprised during the call as to why this issue was only uncovered until now. I guess part of the reason might have been that for quite some time, Medicare has been requiring CPT/HCPCS for outpatient hospital procedures. So, it wasn't a problem for them at all. But many private payers did not move away from requiring providers to submit ICD-9 procedure codes to bill for these services. And now the main issue is that those payers and providers have contracts in place defining this code use and establishing reimbursement policies based on them. Many providers are probably able to use either code, since they bill some payers (like Medicare) with the CPT/HCPCS and other payers with the ICD-9 codes. But, again, the problem seems to be in the contracts.

I understand CMS officials and industry reps from AHA, NUBC and others are working on how to address this issue, and hopefully soon we will see a FAQs.

A final thought: to CMS credit, this was something specifically addressed in the lengthy preamble to the Aug 17, 2000 final rule publication. I have extracted below some of the comments and responses from it, where they specifically clarify that covered entities using ICD-9 for outpatient hospital procedures will need to move to the new required code set standard.

Walter.

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42 CFR References (I've bolded the key items):

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-- 162.1000 General requirements. When conducting a transaction covered by this part, a covered entity must meet the following requirements: (a) Medical data code sets. Use the applicable medical data code sets described in §162.1002 as specified in the implementation specification adopted under this part that are valid at the time the health care is furnished. (b) Nonmedical data code sets. Use the nonmedical data code sets as described in the implementation specifications adopted under this part that are valid at the time the transaction is initiated.

-- 162.1002 Medical data code sets. The Secretary adopts the following code set maintaining organization's code sets as the standard medical data code sets:

(a) International Classification of Diseases, 9th Edition, Clinical Modification, (ICD-9-CM), Volumes 1 and 2 (including The Official ICD-9- CM Guidelines for Coding and Reporting), as maintained and distributed by HHS, for the following conditions: (1) Diseases. (2) Injuries. (3) Impairments. (4) Other health problems and their manifestations. (5) Causes of injury, disease, impairment, or other health problems.

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(b) International Classification of Diseases, 9th Edition, Clinical Modification, Volume 3 Procedures (including The Official ICD-9-CM Guidelines for Coding and Reporting), as maintained and distributed by HHS, for the following procedures or other actions taken for diseases, injuries, and impairments on hospital inpatients reported by hospitals: (1) Prevention. (2) Diagnosis. (3) Treatment. (4) Management.

[... (c) and (d) skipped - they reference the NDC and CDP, not relevant in this discussion]

(e) The combination of Health Care Financing Administration Common Procedure Coding System (HCPCS), as maintained and distributed by HHS, and Current Procedural Terminology, Fourth Edition (CPT-4), as maintained and distributed by the American Medical Association, for physician services and other health care services. These services include, but are not limited to, the following: (1) Physician services. (2) Physical and occupational therapy services. (3) Radiologic procedures. (4) Clinical laboratory tests. (5) Other medical diagnostic procedures. (6) Hearing and vision services. (7) Transportation services including ambulance.

[... (f) reference the HCPCS for all other substances, DME, medical supplies, or other items used in health care services ...]. These items

Relevant preamble discussion sections (Federal Register Vol 65 No. 160 - Aug 17, 2000 - Pages 50324-50325):

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"c. Code Sets Proposed. The following code sets were proposed as initial standards:

(a) Diseases, injuries, impairments, other health related problems, their manifestations, and causes of injury, disease, impairment, or other healthrelated problems. The standard code set for these conditions is the International Classification of Diseases, 9th edition, Clinical Modification, (ICD-9-CM), Volumes 1 and 2, as maintained and distributed by the U.S. Department of Health and Human Services. The specific data elements for which the ICD-9-CM is the required code set are enumerated in the implementation specifications for the transaction standards that require its use.

(b) Procedures or other actions taken to prevent, diagnose, treat, or manage diseases, injuries and impairments. (1) Physician Services. The standard code set for these services is the Current Procedural Terminology (CPT-4) maintained and distributed by the AMA. The specific data elements for which the CPT-4 (including codes and modifiers) is a required code set are enumerated in the implementation specifications for the transaction standards that require its use. (2) Dental Services. The standard code set for these services is The Code on Dental Procedures and Nomenclature, printed as "The Code" and published as CDT, maintained and distributed by the ADA for a charge. The specific data elements for which the Dental Code is a required code set are enumerated in the implementation specifications for the transaction standards that require its use.

(3) Inpatient Hospital Services. The standard code set for these services is the International Classification of Diseases, 9th edition, Clinical Modification (ICD-9-CM), Volume 3 procedures, maintained and distributed by the U.S. Department of Health and Human Services. The specific data elements for which ICD-9-CM, Volume 3 procedures, is a required code set are enumerated in the implementation specifications for the transaction standards that require its use.

b. Comment: Two commenters stated that the proposal did not reflect current uses of some code sets. One commenter stated that in addition to being used for inpatient procedural coding, the ICD-9- CM procedure codes are also required by many health plans for the reporting of facility-based outpatient procedures. The second commenter pointed out that in addition to being used by physicians and other health care professionals, the combination of HCPCS level I and CPT-4 is required for reporting ancillary services such as radiology and laboratory services and by some health plans for reporting facility-based procedures. Further, Medicare currently requires HCPCS level II codes for reporting services in skilled nursing facilities.

Response: Health plans must conform to the requirements for code set use set out in this final rule. Therefore, if a health plan currently requires health care providers to use CPT-4 to report inpatient facility-based procedures, they both would be required to convert to ICD-9.

We agree that the proposal did not reflect all current uses of some code sets. For example, we agree that CPT-4 is commonly used to code laboratory

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HIPAA Consortium Meeting

tests, yet laboratory tests are not necessarily considered to be physician services. Moreover, the proposed rule implied that laboratory tests are a type of other health care service which are encoded using HCPCS. We believe that the architecture of both coding sets, HCPCS and CPT-4, is such that they are both frequently used for coding physician and other health care services. Both of these medical data code sets are standard medical data code sets and may be used in standard transactions (see § 162.1002(e)). Therefore, a health plan using CPT-4 to report outpatient facility-based procedures would not be required to change that practice.

In addition, the proposed rule did not itemize the types of services included in other health care services. These other health care services include the ancillary services, radiology and laboratory which are mentioned in the comment, as well as other medical diagnostic procedures, physical and occupational therapy, hearing and vision services, and transportation services including ambulance. Similarly, other substances, equipment, supplies, or other items used in health care services includes medical supplies, orthotic and prosthetic devices, and durable medical equipment.

In the final rule, we clarify the description of physician and other health care services and we recognize that two code sets (CPT-4 and HCPCS) are used to specify these services. In the proposed rule, we used the term "health-related services" to help describe these services. We believe that use of the term "health-related services" might suggest that these services are not health care. In an effort to prevent this confusion, and because the codes in this category are used to enumerate services meeting the definition of health care, we are using what we believe is the more appropriate term ("health care services") to describe these services. We note that the substance of the category remains the same. The final rule has been revised to indicate that the combination of HCPCS and CPT-4 will be used for physician services and other health care services. The use of ICD-9-CM procedure codes is restricted to the reporting of inpatient procedures by hospitals.

In § 162.1002 we clarify the use of medical code sets. The standard code sets are the following: (a) ICD-9-CM, Volumes 1 and 2 (including The Official ICD-9-CM Guidelines for Coding and Reporting), is the required code set for diseases, injuries, impairments, other health problems and their manifestations, and causes of injury, disease, impairment, or other health problems. b) ICD-9-CM Volume 3 Procedures (including The Official ICD-9-CM Guidelines for Coding and Reporting) is the required code set for the following procedures or other actions taken for diseases, injuries, and impairments on hospital inpatients reported by hospitals: prevention, diagnosis, treatment, and management. (c) NDC is the required code set for drugs and biologics. (d) Code on Dental Procedures and Nomenclature is the code set for dental services. (e) The combination of HCPCS and CPT-4 is the required code set for physician services and other health care services. (f) HCPCS is the required code set for other substances, equipment, supplies, and other items used in health care services.

=====
> From: rxthukr@regence.com [<mailto:rxthukr@regence.com>]

> Sent: Thursday, October 09, 2003 1:23 PM

> To: WEDI Codesets Subworkgroup List

> Subject: ICD-9-CM for UB92 issue - not allowed for
> hospitals outpatient claims

>

> Good morning -

> Last Friday there was discussion on the CMS

> ruling that the ICD-9-CM codes could only be

> used for Hospital inpatient claims and not allowed

> for outpatient claims. We are very interested in

> reviewing the official notification that stated this

> - whether from CMS, HHS, or CDC. If anyone has a

> copy or reference could you please forward it to me.

Consortium Mtg Closed Issues/Action Items Report

Transaction: 837 Inst. Enc.

HIPAA Consortium Meeting

>
> We have seen the AHIMA alert but that is not an
> official source. We are looking for the source that
> has legal jurisdiction to make this statement.
>

> Thanks very much in anticipation.....

> Thuky

>

> rxthukr@regence.com

> 206.287.5418
=====

Excerpt 2:

Question/Answer 2357 on the CMS FAQ website:

Posted: 10/8/2003

CMS FAQ:

http://questions.cms.hhs.gov/cgi-bin/cmshhs.cfg/php/enduser/std_adp.php?p_faqid=2357&p_created=1065631578

Question:

Can ICD-9-CM procedure codes be reported on hospital outpatient claims? If I use HCPCS codes to report hospital outpatient services at the "required" service line level segment for a claim, may I use the ICD-9-CM procedure codes to report hospital outpatient services at the claim level "situational" segment?

Answer:

NO. ICD-9-CM procedure codes were named as the HIPAA standard code set for inpatient hospital procedures. The ICD-9-CM procedure codes were not named a HIPAA standard for procedures in other settings such as hospital outpatient services or other types of ambulatory services. Hospitals may capture the ICD-9-CM procedure codes for internally tracking or monitoring hospital outpatient services; but when conducting standard transactions, hospitals must use HCPCS codes to report outpatient services at the service line level and the claim level, if the situation applies. Even though an ICD-9-CM procedure code qualifier is available, in addition to a HCPCS code qualifier, at the "situational" claim level segment, the Transactions and Code Sets regulation states that ICD-9-CM procedure codes is the adopted standard code set for hospital inpatient services.

In order to continue operations and maintain cash flow, providers, as part of their contingency plan, could continue to report hospital outpatient services with ICD-9-CM procedure codes if required by the health plan. However, health plans must realize that reporting hospital outpatient services with ICD-9-CM procedures codes on standard claim transactions is not compliant, and that their good faith efforts to come into compliance must include the steps being taken to change this requirement.

Posted:

CMS FAQ:

Consortium Mtg Closed Issues/Action Items Report

Transaction: 837 Inst. Enc.

HIPAA Consortium Meeting

http://questions.cms.hhs.gov/cgi-bin/cmshhs.cfg/php/enduser/std_adp.php?p_faqid=2357&p_created=1065631578

Issue/Action #	A-837-00251	Encounters	2-High	Consortium Membe	Closed
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Action Item

Do you have a reason code crosswalk for the CAS segment?

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Lori Petre

8/27/2003

10/22/2003

Description:

Do you have a reason code crosswalk for the CAS segment?
Action Item: We are still working at it.

Resolution:

102203 Email MK: All adjustment reason codes will be accepted. No Crosswalk is needed.

Issue/Action #	A-837-00223	Other - see notes below	2-High	Lori Petre	Closed
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Action Item

We hope to have some 837 initial examples to walk through by the next

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Lori Petre

7/16/2003

8/28/2003

Description:

We hope to have some 837 initial examples to walk through by the next Consortium meeting.

Resolution:

Completed.

Consortium Mtg Closed Issues/Action Items Report

Transaction: 997

HIPAA Consortium Meeting

State: AZ

Issue/Action #	A-997-00206	Other - see notes below	1-Critical	Lori Petre	Closed
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Action Item	Outbound Acknowledgment document needs to be replaced in directory and	Responsible Person:	Date Opened:	Date Due:	Date Completed:
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Description:

Outbound Acknowledgment document needs to be replaced in directory and emailed.

Resolution:

Final Acknowledgement Flows emailed 06/30/03.

Issue/Action #	A-997-00252		2-High	Consortium Membe	Closed
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Action Item	We will review the 997 version.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
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Description:

Q: What did we resolve on the 997 GS08?
Our stance is ... you want the 997 version as the response.
A: I read that the date is 4010, then the actual.
GS08 for a 997 is 4010.
The actual version that you are responding to is at the end of the segment.
Action Item: We will review the 997 version.

Resolution:

Resolved.

Issue/Action #	A-997-00249	Acknowledgements	2-High	Consortium membe	Closed
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Consortium Mtg Closed Issues/Action Items Report

Transaction: 997

HIPAA Consortium Meeting

Action Item	We will compile the issues re: Acknowledgements. Dennis will receive	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	8/27/2003		11/4/2003
	Description:				
	Resolution:				
	Close, resolved.				

Issue/Action #	A-997-00233	Acknowledgements	2-High	Consortium membe	Closed
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Action Item	834 Acknowledgement flows, interpretation of the IG, if you are	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	8/13/2003		11/4/2003
	Description:				
	<p>Q: 834 Acknowledgement flows, interpretation of the IG, if you are requiring a stamp that correlates to what the 997 is responding, then our take is that it makes a 997 not following the standard format.</p> <p>If we or anyone comes up with a new version of a 997, then we will be in trouble, since that tells the translator what version we are working with.</p> <p>This is the issue with a 4010, where the X12 workgroup 8 came out with a recommendation. The recommendation is to use the larger number, since you are telling someone what you are responding to.</p> <p>This also tells your translator what version you are using.</p> <p>Then this is a GS08 issue.</p> <p>Action Item: MaryKay will look into this.</p>				
	Resolution:				
	Close, resolved.				

Issue/Action #	A-997-00227	Acknowledgements	2-High	Lori Petre	Closed
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Consortium Mtg Closed Issues/Action Items Report

Transaction: 997

HIPAA Consortium Meeting

Action Item	The folders for the acknowledgements are ready and we can begin accepting	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	7/16/2003		8/28/2003
	Description:				
	The folders for the acknowledgements are ready and we can begin accepting your 997s. We will send an email notifying you if these are processing well.				
	Resolution:				
	Completed.				

Issue/Action #	A-997-00263	Acknowledgements	2-High	Consortium Membe	Closed
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Action Item	Action Item: MaryKay will compile what we have discussed in reference to	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	9/17/2003		10/22/2003
	Description:				
	Action Item: MaryKay will compile what we have discussed into a flow and attempt to send it out before next consortium meeting.				
	Resolution:				
	Email MK 102203: This was for NCPDP and has been put on hold. (And the 997 will not be used to respond to NCPDP transactions - if used. We will use the NCPDP response.				

Issue/Action #	A-997-00155	Acknowledgements	2-High	Lori Petre	Closed
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Action Item	Why do we need to send an acknowledgment if there is a problem?	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			5/14/2003		6/27/2003
	Description:				
	Why do we need to send an acknowledgment if there is a problem? Will we have a process to alert us that there is a problem?				
	Resolution:				
	See A-997-00206				

Issue/Action #	A-997-00137	Acknowledgements	2-High	Lori Petre	Closed
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Consortium Mtg Closed Issues/Action Items Report

Transaction: 997

HIPAA Consortium Meeting

Action Item	We will send a follow up question regarding the acknowledgement	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			4/9/2003		4/14/2003
Description:					
We will send a follow up question regarding the acknowledgement transactions, requesting some input prior to our next consortium meeting.					
Resolution:					
Email sent 04/14/03					

Issue/Action #	A-997-00132	Acknowledgements	2-High	Lori Petre	Closed
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Action Item	We will look at a notification of what was accepted from the load process, since	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Nancy Mischung			6/27/2003
Description:					
Resolution:					
See A-997-00206.					

Issue/Action #	A-997-00131	Acknowledgements	2-High	Lori Petre	Closed
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Action Item	We will go back and check the flow regarding the 997.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			4/14/2003		4/14/2003
Description:					
We will go back and check the flow regarding the 997.					
Resolution:					
Corrections have been made and emailed to Consortium members 04/14/03.					

Consortium Mtg Closed Issues/Action Items Report

Transaction: 997

HIPAA Consortium Meeting

Issue/Action #	A-997-00258		2-High	Consortium Membe	Closed
Action Item	There is a specific folder for you to place 997's in.	Responsible Person: Lori Petre	Date Opened: 9/17/2003	Date Due:	Date Completed: 10/22/2003
Description: Q: 997 issues A: there is a specific folder for you to place those in. Action Item: We will send the folder name/path to everyone.					
Resolution: 11FTP/HP ID/HLP/ACKIN/PROD TEST					

Issue/Action #	A-997-00261	Acknowledgements	2-High	Consortium Membe	Closed
Action Item	Action Item: Issue has been raised again from a Health plans' perspective of	Responsible Person: Lori Petre	Date Opened: 9/17/2003	Date Due:	Date Completed: 10/7/2003
Description: Action Item: Issue has been raised again from a Health plans' perspective of getting the 5.1 to AHCCCS; this is an issue for at least two of the health plans.					
Resolution: Per Brent, found a batch 1.1 acknowledgement that we will use.					

Issue/Action #	A-997-00257	Acknowledgements	2-High	Consortium Membe	Closed
Action Item	Dennis will send a formal response via email to everyone re: acknowledgements	Responsible Person: Lori Petre	Date Opened: 9/17/2003	Date Due:	Date Completed: 10/22/2003
Description: We do receive a spreadsheet of 997 that are processed and if any issues exist this spreadsheet will be sent. We are currently testing out the process. Q: We are trying to send off two TA1s... Will you accept the 997s with a tilde or carriage return?					

Consortium Mtg Closed Issues/Action Items Report

Transaction: 997

HIPAA Consortium Meeting

A: Yes

One has to do with the transmission and another with the EDI.

Q: This is an issue for us. We would prefer to use

Action Item: Dennis will send a formal response via email to everyone.

Resolution:

Completed.

Consortium Mtg Closed Issues/Action Items Report

Transaction: MAP-MERCATOR

HIPAA Consortium Meeting

State: BOTH

Issue/Action #	A-MAP-00153	Other - see notes below	2-High	Nancy Mischung	Closed
Action Item	Document stating the approach on how to handle the situational elements.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
	Description:	Nancy Mischung	5/14/2003		9/3/2003
	Document stating the approach on how to handle the situational elements. We will look to publish something explaining this.				
	Resolution:				
	completed.				

Consortium Mtg Closed Issues/Action Items Report

Transaction: NCPDP Claims

HIPAA Consortium Meeting

State: AZ

Issue/Action #	A-NCP-00166	Claims	2-High	Consortium Membe	Closed
Action Item	Concerns expressed via internet on NCPDP will be placed on the list.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Brent Ratterree	5/14/2003		10/6/2003
	Description: Concerns expressed via internet on NCPDP will be placed on the list.				
	Resolution: To be addressed at the consortium meeting.				

Consortium Mtg Closed Issues/Action Items Report

Transaction: NCPDP Enc.

HIPAA Consortium Meeting

State: AZ

Issue/Action #	A-NCP-00264		2-High	Consortium Membe	Closed
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Action Item	Q: Health Plan - who would be validating/certifying the NCPDP	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	9/17/2003		10/7/2003
	Description: Q: Health Plan - who would be validating/certifying the NCPDP Transaction. U277 also needs certifying? A: Claredi does not certify NCPDP. So far there is no one certifying the NCPDP 5.1. Q: Who will AHCCCS use? Action Item: AHCCCS will need to follow-up on this item.				
	Resolution: Result from Brent: Patsy from NCPDP told me that WebMD is validating 5.1 transactions and that we may be able to obtain a 5.1 claims file from WebMD or Texas Medicaid In addition I have attached NCPDP's v5.x question & response document.				

Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

State: AZ

Issue/Action #	A-OTH-00156	Other - see notes below	2-High	Lori Petre	Closed
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Action Item	Transactions to FTP server.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
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Description:		5/14/2003		6/4/2003
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Transactions to FTP server. There are firewalls that have the technology built into them. An example will be provided by Michael Anderson.

Resolution:

Addressed.

Issue/Action #	A-OTH-00135	Other - see notes below	2-High	Brent Ratterree	Closed
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Action Item	We will send this Draft document of the Certification Form out along with the	Responsible Person:	Date Opened:	Date Due:	Date Completed:
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Description:		4/9/2003		4/22/2003
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We will send this Draft document of the Certification Form out along with the minutes.

Resolution:

Completed

Issue/Action #	A-OTH-00170	Infrastructure	2-High	Lori Petre	Closed
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Action Item	The technical specs need to be available for direct access to the AHCCCS FTP	Responsible Person:	Date Opened:	Date Due:	Date Completed:
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Description:		4/15/2003		6/4/2003
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The technical specs need to be available for direct access to the AHCCCS FTP server.

Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Resolution:

Addressed.

Issue/Action #	A-OTH-00171	Other - see notes below	2-High	Lori Petre	Closed
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Action Item

Need to finalize B2B requirement handling for certification.

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Description:

Need to finalize B2B requirement handling for certification.

Resolution:

The data itself needs to be certified and not the process. Additionally, the CEO, CFO, or designated individual needs to concurrently certify the data submitted. The process to create the data file could corrupt the data, but the individual certifying the data must certify after the process creates the data.

Issue/Action #	A-OTH-00124	Other - see notes below	3-Low	Gloria Collins	Closed
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Action Item

We will check on what Tina had documented in reference to the

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Description:

We will check on what Tina had documented in reference to the translators that each plan has.

Resolution:

Addressed.

Issue/Action #	A-OTH-00125	Other - see notes below	2-High		Closed
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Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Action Item	We can make the documented FTP process available.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			4/9/2003		6/4/2003
	Description: We can make the documented FTP process available.				
	Resolution: Addressed.				

Issue/Action #	A-OTH-00134	Testing	2-High	Lori Petre	Closed
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Action Item	A representative test file, out of our system and integration testing would be	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			4/9/2003		6/4/2003
	Description: A representative test file, out of our system and integration testing would be logical. We will provide one for the Group 1 transactions by end of April and then at the end of May for Group 2.				
	Resolution: Addressed.				

Issue/Action #	A-OTH-00230	Other - see notes below	2-High	Lori Petre	Closed
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Action Item	Email summarizing what we have heard for suggestions and requesting your	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	7/16/2003		8/28/2003
	Description: Email summarizing what we have heard for suggestions and requesting your inputs will be sent out.				
	Resolution: Completed.				

Issue/Action #	A-OTH-00209	Other - see notes below	2-High	Lori Petre	Closed
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Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Action Item	Problem Report Summaries: Primary and Secondary testing contacts will	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Mariaelena Ugarte	6/4/2003		8/6/2003
	Description:				
	Problem Report Summaries: Primary and Secondary testing contacts will receive information with what was identified, fixed and dates.				
	Resolution:				
	Problem Report Stats have been completed and posted to the WEB.				

Issue/Action #	A-OTH-00211	Other - see notes below	2-High	Lori Petre	Closed
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Action Item	Survey was sent out regarding translators used and Claredi Workgroup,	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Mariaelena Ugarte	6/4/2003		8/5/2003
	Description:				
	Survey was sent out regarding translators used and Claredi Workgroup, and we are now compiling information that will be sent out shortly.				
	Resolution:				
	Completed.				

Issue/Action #	A-OTH-00220	Other - see notes below	2-High	Lori Petre	Closed
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Action Item	We are going to extract key implementation dates by transaction	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	7/16/2003		8/28/2003
	Description:				
	We are going to extract key implementation dates by transaction from the implementation plan to publish by the next Consortium meeting.				
	Resolution:				
	Completed.				

Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Issue/Action #	A-OTH-00221	Other - see notes below	2-High	Lori Petre	Closed
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Action Item	AHCCCS to inform Mercy Care how to submit both proprietary and HIPAA	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	7/16/2003		10/22/2003
Description:					
AHCCCS to inform Mercy Care how to submit both proprietary and HIPAA format files.					
Resolution:					
Mercy Care can send both Encounter files to the prod directory. Please name proprietary with current STDs. HIPAA file can be any other name, for now. This is to differentiate from the current production proprietary file. Both proprietary and HIPAA 837 files can be submitted by Mercy. The Encounter Group will only move certified proprietary file to be processed by the production environment.					

Issue/Action #	A-OTH-00224	Other - see notes below	2-High	Lori Petre	Closed
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Action Item	Transmission file with one certification will be reviewed further.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	7/16/2003		8/28/2003
Description:					
Transmission file with one certification will be reviewed further.					
Resolution:					
Completed					

Issue/Action #	A-OTH-00225	Other - see notes below	2-High	Lori Petre	Closed
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Action Item	A follow-up will be sent by next meeting asking for input on other options we	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	7/16/2003		9/17/2003
Description:					
A follow-up will be sent by next meeting asking for input on other options we have for certification.					

Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Resolution:

Resolved.

Issue/Action #	A-OTH-00207	Other - see notes below	2-High	Nancy Mischung	Closed
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Action Item

Email sent on Zero record blank file:
Confirmation on the agreed upon

Responsible Person:

Date Opened:

Date Due:

Date Completed:

6/4/2003

6/11/2003

Description:

Email sent on Zero record blank file: Confirmation on the agreed upon solution will be sent early next week.

Resolution:

Per agreement at the Wednesday, June 4th Consortium Meeting.
The Health Plans have requested that AHCCCS send the trailer record as it exists in today's process, when there are no records on the 834 file. We have completed the coding and unit test, and have transmitted the first trailer record files through Mercator and out to the Health Plans as requested. The Health Plans must be aware however that these files with only the trailer records are not intended to be processed by their maps as EDI 834 transactions.
We also found a solution to create the same trailer record when the 820 has no records. The 820 will have a trailer record identical to the 834 when there is no 820 information available. This will be available when the next 820 process runs.

Issue/Action #	A-OTH-00229	Other - see notes below	2-High	Lori Petre	Closed
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Action Item

Need a summarization of impacts for the
next consortium.

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Lori Petre

7/16/2003

8/28/2003

Description:

Need a summarization of impacts for the next consortium.

Resolution:

Completed.

Issue/Action #	A-OTH-00205	Other - see notes below	2-High	Nancy Mischung	Closed
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Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Action Item	We will have a more detail regarding the electronic signature/certification update	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Nancy Mischung	6/4/2003		6/30/2003
	Description: We will have a more detail regarding the electronic signature/certification update by next meeting.				
	Resolution: ISD is in the process of identifying options which range from manual fax to electronic signature. Meeting is schedule to review the options identified. Once we refine those options we anticipate meeting with key internal customers to share what we have either late the week of 06/30 or early the week of 07/07. The intention is still to implement in October 2003.				

Issue/Action #	A-OTH-00248	Other - see notes below	2-High	Consortium Membe	Closed
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Action Item	We will include the materials that were presented to the CFOs on the Web site.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Nancy Mischung	8/27/2003		10/6/2003
	Description:				
	Resolution: This information was provided to Lori and she sent an e-mail to the Health Plan participants on Thursday, 8/28/03.				

Issue/Action #	A-OTH-00255		2-High	Consortium Membe	Closed
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Action Item	Decisions were received from everyone. There will be one more opportunity to	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	9/17/2003		9/25/2003
	Description: Decisions were received from everyone. There will be one more opportunity to change/validate that decision next week. Action Item: Next Wednesday we will send out another email to make sure that we captured what you elected.				
	Resolution: Per Lori, Close, not rally an aciton item.				

Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Issue/Action #	A-OTH-00262		2-High	Consortium Membe	Closed
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Action Item	Request: Could we possibly get the minutes out sooner, preferably by next	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	9/17/2003		9/25/2003
	Description:				
	Request: Could we possibly get the minutes out sooner, preferably by next week?				
	Resolution:				
	Sent ahead of schedule.				

Issue/Action #	A-OTH-00270	Other - see notes below	2-High	Nancy Mischung	Closed
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Action Item	Isd_cust_supp@ahcccs.state.us Is our customer support address where	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Nancy Mischung	10/8/2003		11/4/2003
	Description:				
	Isd_cust_supp@ahcccs.state.us Is our customer support address where the tickets are opened and they will be asked to always provide a ticket number.				
	Resolution:				
	Close, resolved.				

Issue/Action #	A-OTH-00277	Other - see notes below	2-High	MaryKay McDaniel	Closed
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Action Item	The Contract Type Code – Action Item: Contract Type Crosswalk	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	10/8/2003		10/22/2003
	Description:				
	The Contract Type Code – Action Item: Contract Type Crosswalk will be put together of what is used today and what they will become				
	Resolution:				
	Email MK 102203: Contract type codes did not change. There is no cross walk needed.				

Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Issue/Action #	A-OTH-00278	Other - see notes below	2-High	Consortium Membe	Closed
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Action Item

The Delay Reason Code at this point in time will be accepted. There will be no

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Lori Petre

10/8/2003

11/4/2003

Description:

The Delay Reason Code at this point in time will be accepted. There will be no processing associated with the code today.
Action Item: Brent will put together in a longer term some uses for the delay reason code for timeliness

Resolution:

Delay reason code logic will be implemented in the future following initial HIPAA implementation.

Issue/Action #	A-OTH-00281	Other - see notes below	2-High	Brent Ratterree	Closed
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Action Item

Local Codes handout

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Brent Ratterree

10/29/2003

11/18/2003

Description:

We had a few codes that were still an issue from the mapping document. Such as Transportation for Ambulatory Mileage and Urban stretcher mileage.
Action Item: Will be sent out with the minutes.

Resolution:

Completed.

Issue/Action #	I-OTH-00228	Other - see notes below	2-High	Lori Petre	Closed
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Issue

VPN issue – we are trying to automate the process and put in place a VPN

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Lori Petre

7/16/2003

8/28/2003

Description:

VPN issue – we are trying to automate the process and put in place a VPN concentrator. We want to do a LAN-to-LAN connection.
Dennis will discuss this VPN issue with Network Services.

Resolution:

Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Completed

Issue/Action #	A-OTH-00160		1-Critical	Lori Petre	Closed
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Action Item

Response to questions that were sent to Brent.

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Description:

Responses to questions that were sent to Brent will be provided by 06/04/03..

Resolution:

Completed

Issue/Action #	A-OTH-00139	Other - see notes below	2-High	Lori Petre	Closed
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Action Item

There will be information published within the next few weeks, such as, what

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Description:

There will be information published within the next few weeks, such as, what has happened in our translator versus what we need to do in our remediation.

Resolution:

Presented at the Consortium meeting 04/09/03.

Issue/Action #	A-OTH-00140	Testing	2-High	Lori Petre	Closed
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Action Item

An email will be sent notifying you of what we have in mind for our Testing

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Description:

An email will be sent notifying you of what we have in mind for our Testing approach. If you have any additional suggestions they are welcome.

Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Resolution:

Addressed at 04/09/03 Consortium

Issue/Action #	A-OTH-00141	Other - see notes below	2-High	Lori Petre	Closed
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Action Item

We will send out something soliciting your interest to see if increasing the

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Description:

We will send out something soliciting your interest to see if increasing the frequency of this meeting to possibly every three weeks would be possible.

Resolution:

Email sent week of 03/31. Completed

Issue/Action #	A-OTH-00142	Other - see notes below	2-High	Lori Petre	Closed
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Action Item

We are trying to clean up the email contacts.

Responsible Person:

Date Opened:

Date Due:

Date Completed:

Description:

We are trying to clean up the email contacts.

Resolution:

Completed

Issue/Action #	A-OTH-00143	Other - see notes below	2-High	Lori Petre	Closed
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Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Action Item	A new copy of the Code Sets will be sent.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			3/12/2003		3/22/2003
	Description: A new copy of the Code Sets will be sent.				
	Resolution: This is included in the new companion guides on the web site. A separate document is not needed.				

Issue/Action #	A-OTH-00146		2-High	Lori Petre	Closed
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Action Item	Mary Kay will look at this date file under FYI.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			3/12/2003		3/22/2003
	Description: Mary Kay will look at this date file under FYI.				
	Resolution: Done. See the updated companion guides.				

Issue/Action #	A-OTH-00208	Other - see notes below	2-High	Lori Petre	Closed
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Action Item	Melanie is putting together instructions on downloading, emailing, faxing form	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Melanie Carnegie	6/4/2003		7/11/2003
	Description: Melanie is putting together instructions on downloading, emailing, faxing form and will send out later this week. We can also accept problems as an email to the test web address and we will put it into a form.				
	Resolution: Completed.				

Issue/Action #	I-OTH-00152	Claims	2-High	Lori Petre	Closed
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Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Issue	How to Dupe check and get it back out.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Nancy Mischung	5/14/2003		8/28/2003
	Description: How to Dupe check and get it back out of Mercator..				
	Resolution: Completed.				

Issue/Action #	A-OTH-00136	Other - see notes below	2-High	Lori Petre	Closed
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Action Item	The HL7 group letter will be sent with the minutes.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			4/9/2003		4/11/2003
	Description: The HL7 group letter will be sent with the minutes.				
	Resolution: Sent via email 04/11/03.				

Issue/Action #	A-OTH-00161	Tables	2-High	Lori Petre	Closed
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Action Item	Transaction Identifiers - table of what we are calling ourselves and the MCO's in	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			5/14/2003		6/4/2003
	Description: Transaction Identifiers - review of table of what we are calling ourselves and the MCO's in these tables. MCO's will review.				
	Resolution: Completed				

Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Issue/Action #	I-OTH-00162	Other - see notes below	2-High	Consortium Membe	Closed
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Issue	Ventilator clients had to be put in seperately.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			5/14/2003		6/4/2003
	Description:				
	Ventilator clients had to be put in seperately.				
	Resolution:				
	Addressed.				

Issue/Action #	A-OTH-00163	Other - see notes below	2-High	Lori Petre	Closed
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Action Item	Trading Partner information	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			5/14/2003		6/4/2003
	Description:				
	Trading Partner information to be put together by next week.				
	Resolution:				
	Addressed.				

Issue/Action #	A-OTH-00167	HIPAA Enhancements	2-High	Nancy Mischung	Closed
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Action Item	Trailer Record, option of an email sent when a there isn't a file to process.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
			5/14/2003		6/4/2003
	Description:				
	Trailer Record, option of an email sent when a there isn't a file to process.				
	Resolution:				
	Resolved.				

Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

Issue/Action #	A-OTH-00168	Other - see notes below	2-High	Lori Petre	Closed
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Action Item	Email-inquiring which translator, certification software, and the use of	Responsible Person:	Date Opened:	Date Due:	Date Completed:
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Description:

Email-inquiring which translator, certification software, and the use of Claredi, an participation of a Claredi Workgroup.

Resolution:

Email sent 05/19/03; 5:07 pm.

Issue/Action #	A-OTH-00204		1-Critical	Brent Ratterree	Closed
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Action Item	30 additional waiver codes.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
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Description:

30 additional waiver codes. Timeframe when that will be available?
We will follow up with Brent.

Resolution:

Resolved.

Issue/Action #	I-OTH-00100	Recipient	2-High	Lori Petre	Closed
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Issue	Contract awarded to different plans. Should be announced by 05/08.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
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Description:

Resolution:

Consortium Mtg Closed Issues/Action Items Report

Transaction: OTHER

HIPAA Consortium Meeting

State: BOTH

Issue/Action #	A-OTH-00120	Testing	2-High	Frank Straka	Closed
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Action Item	When will User test be scheduled to start?	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Lori Petre	4/28/2003		4/28/2003

Description:

When will User test be scheduled to start?

Resolution:

No user testing scheduled invited to participate in overall testing beginning 03/07-07/31/03.

Issue/Action #	A-OTH-00157	Other - see notes below	2-High	Lori Petre	Closed
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Action Item	Lag time of test data.	Responsible Person:	Date Opened:	Date Due:	Date Completed:
		Nancy Mischung	5/14/2003		6/4/2003

Description:

How soon can we get the test data that will be the same as the production data. We will also look at catching up with files on Mondays, for the weekend.

Resolution:

Resolved.
